

### MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

Substitute for Form PTO-1360  
(For use with Form PTO/SB/06)

Application Number

Filing Date

09445837

Applicant(s) **Anastasia Daifotis**

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1		---	---		
2		1				
3		1	---	---		
4		1	---	---		
5		1	---	---		
6		1	---	---		
7		1	---	---		
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47		1	---	---		
48		1	---	---		
49		1	---	---		
50		1	---	---		
Total Indep	52		0		0	
Total Depend						
Total Claims	53		1		0	

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
51		1	---	---		
52		1	---	---		
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